

Form CPF M 102: Campaign Finance Report TOWN Of Control of Contro

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Candidate signature (in ink)

[Massachusetts	
City or Town Clerk or Election Commission	
Please print or type all information, except signatures.	
Fill in dates: Reporting Period Beginning 1 1 10 Ending 3 3 10	
Type of report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report disse	olution
Full Name of Candidate (if applicable) Wellesley Brand of Selectmen Office Sought and District A Crestrand Drive Wellesley Residential Address Tel. No. (optional) Citizens ter Rich Committee Name Heather A. Rich Name of Committee Treasurer 34 Crestrand Drive Wellesley Committee Mailing Address Tel. No. (optional)	
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used TO Read	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and rep campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: 3-[-(0) Treasurer's signature (in ink) Date	campaign resents the
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)	
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not recontributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filling separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and representable in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:	campaign

3.11.10 Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

number on each page.							
Date Name and Residential Address		Amount					
Received	(alphabetical listing required)			(for contributions of \$200 or more)			
212	Robert A. Rich 2410 thirburside Drive Long Boat Key Fl.	500	-	Retired			
2.25	Robert A. Rich 2400 Harbarside Drive Long Beat Key Fl. Shirley C. Rlich Wellesley MA.	500	-	Retired Retired			
	The same of the sa						
	•						
		*					
Line 9:	Total receipts in excess of \$50 (or listed above)	1000	-				
Line 10: Total receipts \$50 and under* (not listed above)							
-	TOTAL RECEIPTS IN THE PERIOD	1,000	-	Enter on page 1, line 2			
1,000							

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

number on each page.						
Date Paid	To Whom Paid (alphabetical listing)	Address Purpose of Expenditure			Amount	
	(aiphabetical listing)	127 /anta 1 St				
2.13	Minu tenan Press	Natick MA. 01760	Postcards	440	74	
2.13	Staples	127 Central St. Natick MA. 01760 163 Highkund Ace Nedlyn MAZYY 1150 Great Plante Nedlyn MA 02442	y Labels	30	80	
	Unital States Post Office	Needman MA 02492	Postage	504	_	
•						
	Line 12: Expenditures over \$50 \$975					
	Line 13: Expenditures \$50 and under*				CH	
Enter on page 1, line 4 Line 14: TOTAL EXPENDITURES 7975 54					54	

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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